## SPECIAL ORDERS

The SPEAKER pro tempore. Under the Speaker's announced policy of January 7, 2003, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Michigan (Mr. McCotter) is recognized for 5 minutes.

(Mr. McCOTTER addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Ohio (Mr. BROWN) is recognized for 5 minutes.

(Mr. BROWN of Ohio addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

# WHAT SENIORS WILL REALLY PAY

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Indiana (Mr. BURTON) is recognized for 5 minutes.

Mr. BURTON of Indiana. Mr. Speaker, we are going to be voting before the end of the week on probably one of the most sweeping reforms in Medicare in the history of the program, and it is going to involve prescription drug coverage for seniors. There is a lot of misunderstanding about the bill, mainly because the bill has not been reported out of the committee yet; but we have gotten a synopsis of the bill, and I think it is important to see what this is really going to do.

Tonight, and I am going to be doing this every night, tonight I have a chart that shows what seniors will really pay on average. This is an average. If we look at the chart, the annual premium that seniors will pay every year is \$420, and then they have a \$275 deductible which totals \$695. Then they will pay 25 percent of the next \$1,925. The government will pay 75 percent, and that is a figure of \$481. If we add those together, that is \$1,176. And when we take out the amount that the senior is going to pay as opposed to what the government is going to be pay, for that \$1,176, the senior will be getting \$1,444.

After that there is what they call the doughnut hole: from \$2,200 to \$5,044 there is no coverage. So seniors will be required to pay on average about \$2,844. If we add the other costs I enumerated. we are looking at a total cost to seniors on an annual basis, if they get about \$5,000 in expenditures, they will pay \$4,020 and the government will pay

\$1,444 of the total figure.

The fact of the matter is the senior will be out \$4,020, and the government's part will be \$1,444. I think it is very important that we make certain seniors understand this before we pass this bill because I think most seniors believe they are going to get first dollar coverage or get very broad coverage in a very short period of time, and this will

be a big disappointment to them, in my opinion.

The other thing I would like to point out is the cost of Medicare and Medicaid

When I first got elected to the Indiana General Assembly, and I served in the Indiana State Senate, we were blackjacked by the Federal Government into taking Medicaid. At that time they told us it would cost about \$20 million per year for the Medicaid

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Medicaid in Indiana this past year was \$1.3 billion for our share and \$2.5 billion for the Federal Government share. If you just take the Indiana share, you will find that it is about 70times what the initial cost was of Medicaid. So it went up 70 times since 1969. If you look at Medicare, Medicare was passed in 1965 and in 1967 Medicare cost, across the country, \$3 billion. In 2001, Medicare cost \$241 billion. I think it is very important that we put all this in perspective, because Medicare went up 80 times since 1965, Medicaid went up 70 times since 1969. And so we can anticipate that there will be a rapid growth in the prescription drug coverage as seniors find out what they are not getting and what they expected.

I would like to say to my colleagues on both sides of the aisle, seniors need to get the facts. The fact is they are not going to get the benefits that they think they are going to get, and if they do get the benefits that they think they are going to get, the cost is going to be much higher than the \$400 billion over 10 years they have talked about. As a matter of fact, I have been told, and I cannot verify this, that CBO has said it is going to cost \$432 billion over the next 10 years, and the bill has not yet been reported to my knowledge out of committee.

I think this is very, very important. AARP, the senior organization, has said this is a very beneficial thing for seniors, and it is a good first step. I think they realize that when seniors find out about this, they are going to demand more. I can understand that. So what will happen, I believe, is what happened in 1988 when we passed the catastrophic health care bill. Seniors thought they were getting a good deal. I voted against that bill. There were 11 of us that voted against it in 1988. We were castigated by senior groups and seniors across the country because they said we did not care about them. But a year and a half later, when seniors found out what was in the bill, they were chasing Dan Rostenkowski, the chairman of the Committee on Ways and Means, down the street with umbrellas, beating on his car saying, what have you done to us and the bill was repealed within a short period of

I am going to make a prediction tonight. If we pass this bill in its present form, I believe that the seniors are

going to be very upset not only with the Congress, but with AARP and other groups that say this is a very good first step. Because when they find out that the benefits that they anticipate are not there, they are going to be very angry just like it was in 1988. I would like to say to my colleagues, let us do what absolutely must be done to help seniors. Seventy-six percent of the seniors have a plan where they get their prescription drugs already. Twentyfour percent do not. We ought to help the 24 percent who do not. Those are the ones that we need to be helping. If we did that, I think we would solve a large part of the problem.

I will be back tomorrow night.

The SPEAKER pro tempore (Mr. ROGERS of Alabama). Under a previous order of the House, the gentlewoman from the District of Columbia (Ms. NORTON) is recognized for 5 minutes.

(Ms. NORTON addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

## EXCHANGE OF SPECIAL ORDER

Mr. CUMMINGS. Mr. Speaker, I ask unanimous consent to take my special order time out of order.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Maryland?

There was no objection.

## IN MEMORIAM: HOWARD PETERS RAWLINGS, 1937-2003

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Maryland (Mr. CUMMINGS) is recognized for 5 minutes.

Mr. ČUMMINGS. Mr. Speaker, I rise to remember and honor a teacher and mentor and a friend, a dedicated husband and father from my hometown of Baltimore who rose from modest beginnings to lift up the people of his community and the State of Maryland.

Howard Peters Rawlings spent his earliest years in Baltimore's Poe Homes public housing project. However, when he finally succumbed to cancer on November 14 of this year, he had become one of the most influential and well-respected leaders of the great State of Maryland. Pete Rawlings' life exemplified the character and integrity that all Americans should seek to achieve in their own lives. That, Mr. Speaker, is why I ask that we pause in the work of this great House to reflect upon the character of this truly great

Despite the daily hardships of their lives, Pete Rawlings' parents, Howard Toussant and Beatrice Peters Rawlings, instilled in him the core values for which I rise to honor him today. Pete was born during the Great Depression, an age when few Americans expected a lifetime of exemplary achievement from any young African American. The young Howard Rawlings was not deterred, however. As a matter of fact, he was determined to be excellent at everything he did, and he was